

Fees pursuant to Consolidated Appropriations Act. 2005 (H.R. 4418)

FEE TRANSMITTAL For FY 2006

Complete if Known

Application Number	09/932,371
Filing Date	August 17, 2001
First Named Inventor	Mazzone
Examiner Name	O.F. Fernandez Rivas
Art Unit	2129
Attorney Docket No.	011323.00007

■ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$455.00)

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

■ Deposit Account Deposit Account Number: 08-2442 Deposit Account Name: Hodgson Russ LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, **except for the filing fee**
☒ Charge any additional fee(s) or underpayments of fee(s) ☐ Credit any overpayments
 under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fees Paid (\$)	Multiple Dependent Claims
-20 or HP = _____	x _____	= _____		Fee (\$) Fees Paid (\$)

HP = highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee (\$)	Fees Paid (\$)
-3 or HP = _____	x _____	= _____	

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fees Paid (\$)
- 100 = _____ / 50 = _____		(round up to a whole number) x _____	= _____	


4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Month extension fee (\$60.00); RCE (\$395.00)

Fees Paid (\$)
\$455.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 40,786	Telephone 716-856-4000
Name (Print/Type)	R. Kent Roberts		Date June 22, 2006

I hereby certify that this correspondence is being electronically transmitted to the U.S. Patent and Trademark Office on the date shown below.

Rachel S. Watt Date: June 22, 2006

Signature